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CONFIRMATION NO. 3007

SERIAL NUMBER 10/617,184	FILING DATE 07/11/2003  RULE	CLASS 514	GROUP ART UNIT 1617	ATTORNEY DOCKET NO. P63461US4
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APPLICANTS

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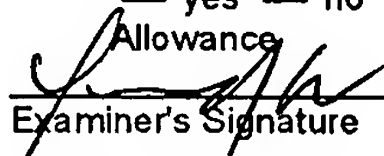
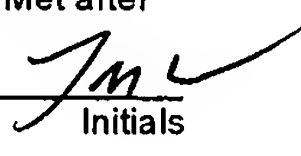
**\*\* CONTINUING DATA \*\*\*\*\***

This application is a DIV of 09/956,739 09/18/2001 PAT 6,624,195  
 which is a DIV of 09/284,231 06/10/1999 PAT 6,331,568  
 which is a 371 of PCT/GB97/02738 10/07/1997

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

UNITED KINGDOM 9621294.9 10/11/1996  
 UNITED KINGDOM 9626062.5 12/16/1996

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
**\*\* 10/08/2003**

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance   Examiner's Signature Initials	STATE OR COUNTRY UNITED KINGDOM	SHEETS DRAWING 0	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 1
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ADDRESS  
 00136  
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TITLE  
 Pharmaceutical preparation comprising eicosapentaenoic acid and/or stearidonic acid

<input type="checkbox"/> All Fees
<input type="checkbox"/> 1.16 Fees ( Filing )

<b>FILING FEE</b>  <b>RECEIVED</b> <b>750</b>	<b>FEES:</b> Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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